

Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935
Madison, WI 53708-8935

FAX #: (608) 267-3816
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53703
E-Mail: web@drl.state.wi.us
Website: <http://www.drl.state.wi.us>

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

INFORMATION REGARDING CHARITABLE ORGANIZATION REGISTRATION STATEMENT

To be eligible to receive a Charitable Organization Registration, the following items must be completed and on file in the board office:

1. Completed and notarized Charitable Organization Registration Statement (Form #296) with the \$15 fee.
2. A copy of one of the following: your organization's Charter, Articles of Organization, Agreement of Association, Instrument of Trust, Constitution or other organization instrument and bylaws.
3. Foreign corporations must submit a copy of the Certificate of Incorporation issued by the state in which they are incorporated.
4. A statement explaining how the organization will use the contributions received.
5. A copy of the federal application for "Recognition of Exemption" (Form #1023) if your organization filed an application with the IRS and has not yet received a tax status determination. If it has received a determination, a copy of the determination letter.
6. If during your organization's most recently completed fiscal year the sum of contributions received by your organization was over \$5,000 (regardless of whether solicited or unsolicited), you will need to submit a "Charitable Organization Annual Financial Report" (Form #308) for that accounting period. You may, however, file IRS Form #990 in lieu of Form #308, along with the "Wisconsin Supplement to Financial Report on Form Other Than Form #308" (Form #1952).
7. If during your organization's most recently completed fiscal year, the sum of contributions received by your organization was \$5,000 or less, you will need to submit an "Affidavit in Lieu of Annual Financial Report" (Form #1943).
8. If during your organization's most recently completed fiscal year, the sum of contributions received was less than \$50,000, and you only solicited in one community (defined as your county of residence), you may submit the affidavit in lieu of financial report (Form #1943).
9. If your organization uses a professional fund-raiser or fund-raising counsel for soliciting contributions in Wisconsin, the complete name and address of the professional fund-raiser or fund-raising counsel must be provided.
10. If your organization is registered or has a permit, license or other formal authorization from other states for soliciting contributions, list all such agencies.
11. A detailed statement of explanation, if your organization's license, permit or registration has ever been denied or revoked by another governmental agency or if any such proceedings are pending.
12. A detailed statement of information, if your organization has ever been enjoined from soliciting contributions or if any such proceedings may be pending.
13. Completed and notarized Convictions and Pending Charges (Form #2252) if any of your organization's officers, directors, trustees or executive personnel have ever been convicted of a felony or misdemeanor or if any such proceedings may be pending.

Failure to submit the appropriate documentation will delay the processing of your application.

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

GUIDELINES FOR CHARITABLE ORGANIZATIONS RELATING TO FILING ANNUAL FINANCIAL REPORTS OR AFFIDAVITS IN LIEU OF REPORTS

Who Must File What?

Every charitable organization required to be registered in Wisconsin must file an **annual report** if it has received **contributions** in excess of \$5,000 during its most recently completed fiscal year. Lines 1a and 1b on Form #308, when added together, determine the amount of contributions received by your organization. **NOTE: It makes no difference whether the contributions are solicited or not.**

All registered charitable organizations are required to file a financial report or an affidavit with the department no later than 6 months after the end of their fiscal year. **NOTE: The law does not provide for an extension of the due date. Failure to file on time may be cause for denial of an organization's renewal of registration.** Generally, a financial report should be submitted on the department's Form #308; however, the department is authorized to accept copies of financial reports submitted to other states or the IRS Form #990 (or #990EZ or 990-PF), provided that reports of other states are substantially similar to Form #308. An organization which files the IRS Form #990 or a similar financial report from another state must also file Wisconsin Form #1952, Wisconsin Supplement to Financial Report on Form Other Than Form #308. If an organization is exempt from filing a financial report for one of the 2 reasons stated below, it must file an affidavit stating the fact of and reason for the exemption. To facilitate the filing of an affidavit by a registered organization, the department has prepared an affidavit form, Form #1943.

Every registered charitable organization which received **contributions** in excess of **\$100,000** during its most recently completed fiscal year must file an **audited financial statement**, prepared in accordance with generally accepted accounting principles and accompanied by the opinion of an independent certified public accountant relating to the financial statement. The

organization must also file Form #1952, as stated in the paragraph at the left. The \$100,000 contribution level is raised to \$175,000 if a charitable organization has received during its most recently completed fiscal year one or more contributions from one contributor totaling \$75,000 or more.

EXEMPTIONS

1. An organization which operates solely within one community and that received less than \$50,000 in **contributions** during its most recently completed fiscal year may apply to the department for an exemption to the reporting requirement. The department has promulgated an administrative rule which specifies the criteria and procedures for obtaining this exemption. Please refer to the affidavit form, Form #1943, for the meaning of the term "operates solely within one community".

2. Every registered charitable organization which received \$5,000 or less in **contributions** during its most recently completed fiscal year is exempt from filing an annual report, but must submit an **affidavit**. The organization may file its affidavit on Form #1943.

There is **NO** report filing fee.

Difference Between Annual Reports and Registration Renewals

In addition to filing a financial report or audited financial statement no later than 6 months after the end of a fiscal year. An organization is required to renew its registration every year and pay a \$15 renewal fee. Renewal notices are sent 45 days prior to the annual due date of July 31st. Filing a report and renewing your organization's registration are two separate actions on your part.

Where to File

Mail all reports or affidavits to the Department of Regulation and Licensing, Charitable Organizations, P.O. Box 8935, Madison WI 53708.

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INSTRUCTIONS FOR COMPLETING FORM #308

Introduction

The Charitable Organization Annual Financial Report (Form #308) is designed to provide a complete and full financial reporting of the organization's charitable and non-charitable activities in sufficient detail to permit public evaluation of its operations. Form #308 and the instructions for completing the form have been patterned after Form #990, prepared by the Internal Revenue Service. When in doubt about certain complex or technical issues, you may want to follow the more extensive guidelines provided by the IRS for completing Form #990.

Accounting Period

The Charitable Organization Annual Report (Form #308) should cover the organization's established 12-month accounting period and should reconcile with the previously submitted report.

Bookkeeping Basis

The basis for recording the organization's financial activities should be consistent over the years; that is, cash, accrual or some other modified method.

Omit Cents

You may round off cents to the nearest dollar.

Information About the Organization

Enter the name of your organization, the registration number issued to it by the department (see your registration certificate or the department's mailing label), your organization's address or P.O. Box, your organization's employer identification number (FEIN), the city, village or town, the state, zip code and principal telephone number of your organization and indicate the type of organization you are.

The term "principal salaried employees" in this document refers to the chief administrative officers of your organization, but does not include the heads of separate departments or smaller units within the organization.

LINE-BY-LINE INSTRUCTIONS

1a Direct public support. Enter the total contributions, gifts, grants (excluding governmental grants), and bequests received **directly from the public.**

NOTE: On line 1a include payments, or the part of any payment, for which the donor does not receive full consideration from your organization. When you get to line 10, you will report income from special fund-raising events and activities such as dinners, door-to-door sales of merchandise, carnivals, and bingo/raffle games. However, when the buyer pays more for such goods or services than their value, report the excess on line 1a as a **contribution** representing direct public support.

Contributions on line 1a also include grants that are equivalent to contributions. Such grants are normally made to encourage the grantee organization to carry on programs or activities that further its exempt purposes. The grantor may specify for which of recipient's activities the grant may be used. A grant is still equivalent to a contribution if the grantee performs a service or produces a work product that benefits the grantor incidentally. However, a grant is a payment for services, and not a contribution, if the grant requires the grant recipient to provide that grantor with a specific service, facility, or product rather than to give a direct benefit primarily to the general public or to that part of the public served by the organization.

To report **contributions** received in a form **other than cash**, use the market value as of the date of the contribution. When market value cannot be readily determined, use an appraised or estimated value.

- 1b Indirect public support.** Enter the total contributions received **indirectly** from the public through solicitation campaigns conducted by federated fund-raising agencies (such as the United Way) or affiliate organizations.
- 1c** Enter the **total** of amounts reported on lines 1a and 1b.
- 2 Government grants.** Enter the total of all government grants.
- 3 All program service revenues** must be included, such as fees for services, admissions, tuition and registration fees.
- 4** Enter membership and affiliate **dues and assessments**, excluding any amounts which exceed reasonable membership benefits and are regarded as contributions which should be included on line 1a.

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- 5** Enter **interest** income on savings and temporary cash **investments**. Dividends or earnings from mutual savings banks, etc., are interest and should be entered here.
- 6** Enter **dividends** and interest from debt and equity **securities** (stocks and bonds) of the type reportable on line 46, including amounts received from payments on securities loans; but not capital gains dividends reportable on line 9c.
- 7a** Enter **gross rental income** for the year from investment property reportable on line 47.
- 7b** Enter your rental expenses paid or incurred for the income reported on line 7a. Include depreciation if it is recorded in the organization's books and records.
- 7c** Subtract line 7b from line 7a. Show any loss in parentheses.
- 8 Other investment income.** Enter the amount of investment income not reportable on lines 5 through 7 and describe the type of income in the space provided or in an attachment. The income should be the gross amount derived from investments reportable on line 48. Do not include income from program-related investments, nor unrealized gains and losses on investments carried at market value.
- 9 Capital gains.** Attach a schedule listing the sale or exchange of securities or other assets that are not inventory items. List: (a) date acquired, how acquired (b) date sold and to whom, (c) gross sales price, (d) cost, other basis, or if donated, value at time acquired (state which); (e) expense of sale and cost of improvements made after acquired, and (f) if depreciable property, depreciation since acquired. Show security transactions separately from the sale of other assets.
- 10a** Enter gross revenue, not including contributions reported on line 1a, for **special fund-raising events** and activities (such as dinners, dances, carnivals, raffles, bingo games, and door-to-door sales of merchandise). Be sure to attach a complete schedule. An activity which generates only contributions, such as a solicitation campaign by mail, is not a special fund-raising event and should not be reported on this line.
- 10b** Enter direct expenses. If you include an expense on this line, do not report it on line 11b or in Part II.
- 10c** Deduct line 10b from line 10a and enter the amount on 10c.
- 11a** Enter gross **sales of inventory** items (less returns and allowances), cost of goods sold, and gross profit (or loss) from the sale of all inventory items other than those sold in special fund-raising events and activities reported on line 10. Be sure to attach a schedule.
- 11b** Deduct cost of goods sold.
- 11c** Gross profit or (loss) from sale of inventory.
- 12** Enter any **other revenue** received by your organization and attach a schedule.
- 13** Enter the **total** from the following lines: 1c, 2, 3, 4, 5, 6, 7c, 8, 9c, 10c, 11c, and 12.
- Expenses on lines 14 to 35 which are directly attributable to a particular functional category must be reported in the appropriate column. Expenses which relate to more than one functional category generally should be allocated. When completing this section, do not include amounts previously reported in Part I, lines 7b, 9b, 10b, 11b.
- 14** Enter all **grants and allocations** made by your organization to individuals and organizations. Voluntary awards and grants to affiliates for specific purposes or projects should also be reported on this line. Be sure to attach a schedule indicating: (a) each class of activity; (b) donee's name and address and the amount given; and (c) (in the case of grants to individuals) relationship of donee if related by blood, marriage, adoption or employment (including employees' children) to any person or corporation with an interest in the organization, such as a creator, donor, director, trustee, officer, etc.
- 15** Enter **specific assistance to individuals**, including assistance rendered by others at the expense of your organization. Do not include grants to other organizations that select the person or persons to receive the assistance available through the use of grant funds.
- Attach a schedule showing the total payments for each particular class of activity. For payments to indigent families, do not identify the individuals.
- 16a** Enter all **benefits paid to or for members** or dependents of your organization. Attach a schedule showing amounts of: (a) death, sickness, hospitalization, or disability benefits; (b) unemployment compensation benefits; and (c)

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- other benefits (state their nature). Do not report on this line the cost of employment-related benefits given officers and employees.
- 16b** Enter payments, such as predetermined quota support and dues payments, which you made to a state or national (parent) organization.
- 17** Enter total **compensation paid to officers, directors and trustees** for the year.
- 18** Enter the total of **employees' salaries** not reported on line 16.
- 19** Enter the employer's share of contributions your organization paid to qualified and nonqualified **pension plans** for the year.
- 20** Enter the amount of your contributions to **employee benefit programs** (such as insurance, health, and welfare programs) that are not an incidental part of a pension plan included on line 19.
- 21** Enter the amount of federal, state, and local **payroll taxes** for the year, but only those taxes that are imposed on the organization as an employer. Do not include income taxes withheld. Do not include taxes withheld from employees' salaries and paid to various governmental units.
- 22** Enter your organization's fees to outside **fund-raisers** or fund-raising counsel. Identify professional fund-raiser(s) or fund-raising counsel used.
- 23** Enter all **accounting** and auditing **fees** paid to non-employees.
- 24** Enter all **legal fees** paid to non-employees. Do not include any penalties, fines, or judgments imposed as a result of legal proceedings. Such expenses are to be reported on line 35, as other expenses.
- 25** Enter all **supply costs** as determined by your normal method of accounting for supplies.
- 26** Enter all **telephone**, telegram and similar expenses for the year.
- 27** Enter total **postage** and other delivery expenses, including the cost of shipping materials.
- 28** Enter all **occupancy costs** incurred, including: use of space, utilities (other than those in line 26), outside janitorial services, mortgage interest, real estate taxes, etc. Do not include depreciation or any salaries of your own employees.
- 29** Enter the cost of **renting** and maintaining office and other **equipment**. Do not include auto or truck expenses included in lines 27 or 31.
- 30** Enter **printing** and related costs of producing your organization's newsletters, leaflets, films and other informational materials, except costs such as salaries or postage which are reported separately. Also include the cost of purchased publications.
- 31** Enter all **travel costs** incurred by your organization including: fares, mileage allowances, automobile expenses, meals, lodging and per diem payments.
- 32** Enter total expenses incurred in **conducting meetings** related to your organization's activities. Include facility rental, speakers' fees and expenses, and printed materials. Do not include salaries and travel expenses of your organization's officers, directors, trustees, and employees who participate in these meetings. The registration fees (but not travel expenses) paid for sending your organization's staff to conferences, meetings, or conventions conducted by other organizations are to be included in this total.
- 33** Enter all **interest** paid by the organization, excluding interest attributable to rental property or any mortgage interest treated as occupancy expense on line 28.
- 34** All **depreciation**, depletion or similar expenses are entered here. Include depreciation (amortization) of leasehold improvements. Attach a detailed schedule.
- 35** All **other expenses**--be sure to itemize significant expenses in lines a-f, attaching a separate sheet if more space is necessary. Examples: investment counsel or other professional fees, penalties, fines, judgments.
- 36a** Enter **total functional expenses**, adding lines 14 through 35 in each column.
- 36b** Enter excess or deficit revenue (line 13 less line 36).
- 37** Enter **cash** in all non-interest-bearing accounts or in petty cash. Do not include advances to employees or officers or refundable deposits paid to suppliers or others.
- 38** Enter total of **interest-bearing** checking accounts, savings, and temporary cash investments, such as money market funds, commercial paper,

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certificates of deposit, and U.S. Treasury bills or other governmental obligations that mature in less than 1 year. Report the income from these investments on line 5.

39a Enter total **accounts receivable** that arose from the sale of goods and/or the performance of services. Receivables due from officers, directors, trustees or principal salaried employees must be reported on line 42. Report receivables (including loans and advances) due from other employees on line 50.

39b Deduct allowance for **doubtful accounts**.

40a Enter **pledges receivable** recorded as of the beginning and end of the year.

40b Deduct allowance for **doubtful accounts**.

41 Enter **grants receivable** from governmental agencies, foundations and other organizations as of the beginning and end of the year.

42 Enter **monies due from officers**, directors, trustees and principal salaried employees including secured and unsecured loans to them.

Attach a schedule detailing the following information for each loan or other receivables outstanding at the end of the year that must be reported separately in accordance with the above instructions: (a) borrower's name and title; (b) original amount; (c) balance due; (d) date of note; (e) maturity date; (f) repayment terms; (g) interest rate; (h) security provided by borrower; (i) purpose of loan; and (j) description and fair market value of the consideration furnished by the lender.

43a Enter the combined total of **notes** and **net loans** receivable which were not listed on line 42 and not acquired as investments.

43b Deduct allowance for **doubtful accounts**.

44 Enter value of **inventories** purchased or manufactured by your organization and held to be sold or used in the future.

45 Enter the amount of short-term and long-term **prepayments of expenses** attributable to one or more future accounting periods.

46 Enter the book value of all land, buildings, and equipment held for investment purposes.

47a Enter the book value of all **land, buildings, and equipment** held for investment purposes.

47b Deduct cost basis and accumulated depreciation. Attach a schedule listing these investment fixed

assets held at the end of the year and showing for each item or category listed, the cost or other basis, accumulated depreciation, and book value. Report the income from these assets on line 7a.

48 Enter the amount of all **other investment holdings** not reported on line 46 or 47. Attach a schedule listing and describing each of these investments held at the end of the year. Show the book value for each and indicate whether the investment is listed at cost or end of year market value. Report the income from these assets on line 8. Do not include program-related investments.

49a Enter the book **value of all land, buildings, and equipment** owned by the organization and not held for investment. This would include any property, plant, and equipment owned and used by the organization in conducting its exempt activities.

49b Deduct cost or other basis and accumulated depreciation. Attach a schedule listing these fixed assets held at the end of the year and showing, for each item or category listed, the cost or other basis, accumulated depreciation, and book value.

50 Other assets: list and show the book value of each category of assets not reportable on lines 37 through 49. Attach a separate schedule if more space is needed.

51a Enter **total** of lines 37 through 50.

51b Enter the amount and attach a schedule explaining any changes in net assets between the beginning and end of the year that are not accounted for by the amount on line 36b. Amounts to report here are adjustments of earlier year's activity; unrealized gains and losses on investments carried at market value and any difference between fair market value and book value of property given as an award or grant.

52 Enter the total of **accounts payable** to suppliers and others and accrued expenses, such as salaries payable, accrued payroll taxes, and interest payable.

53 Enter the **unpaid portion of grants and awards** that the organization has made a commitment to pay other organizations or individuals, whether or not the commitments have been communicated to the grantees.

54 Enter the **amount** of contributions, governmental fees or grants, grants from foundations or other organizations, and other fees and support that

Wisconsin Department of Regulation & Licensing

contributors or grantors have designated as payable or **applicable to one or more future years**, either by the terms of the gift or by the terms of the contract or other arrangement.

- 55** Enter the **unpaid balance of loans** received from officers, directors, trustees, and key employees. For loans outstanding at the end of the year, attach a schedule that provides (for each loan) the name and title of the lender and the information listed in items (b) through (j) of the instructions for line 42.
- 56** Enter the amount of **mortgages and other notes payable** at the beginning and end of the year. Attach a schedule showing, as of the end of the year, the total amount of all mortgages payable and, for each non-mortgage note payable, the name of the lender and the other information specified in items (b) through (j) of the instructions for line 42. The schedule should also identify the relationship of the lender to any officer, director, trustee, or key employee of the organization.
- 57 Other liabilities:** list and show the amount of each liability not reportable on lines 52 through 56. Attach a separate schedule if more space is needed.
- 58** Enter the **total** of lines 52 through 57.
- 59** Net Worth: Total Assets (line 51) minus Total Liabilities (line 58).

The answers to all questions in Part IV must be marked in the appropriate column (yes or no). The letters "N/A" or the words "Not Applicable" are not acceptable answers and will cause your application to be returned for completion.

CERTIFICATION

This section must be signed by 2 different authorized officers, including the chief fiscal officer.

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING CHARITABLE ORGANIZATION REGISTRATION STATEMENT

Type or Print in Ink

Name of Organization

Other Names Used for Soliciting

Daytime Telephone Number

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Address (Number, Street, City, State, Zip Code)

If the above organization has any offices in Wisconsin, please provide the address and telephone number of each office, or, if the charitable organization does not have an address, please list the name, address and telephone number of the person or persons having custody of its financial records.

Type of Organization

☐ Corporation ☐ Partnership ☐ Individual ☐ Other: _____

Date Incorporated or Established and Location

Check here if non-stock
Not-for-Profit Corporation

☐

Month and day on which your fiscal year ends: _____

APPLICATION FEE:

Please make checks payable to the Department of Regulation and Licensing. Attach check to this application.

\$15.00

For Receipting Use Only

For Office Use Only	
Registration Number	Registration Date

Wisconsin Department of Regulation & Licensing

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1. Is your organization tax exempt? ☐ Yes ☐ No
If **YES**, attach a copy of the determination letter from the IRS.
If **NO**, has your organization filed with the IRS an Application for Recognition of Exemption (Form #1023)? ☐ Yes ☐ No
If **YES**, attach a copy.
-
2. A. Did your organization solicit or conduct fund-raising in Wisconsin during its most recently-completed fiscal year? ☐ Yes ☐ No
B. During the current fiscal year? ☐ Yes ☐ No
If you answered YES to question 2A, a financial report must be submitted for your organization's most recently-completed fiscal year. Please refer to information relating to financial reports, enclosed with the application packet.
-
3. Does your organization use a professional fund-raiser to solicit contributions in Wisconsin by mail, telephone or any other means of communication? ☐ Yes ☐ No
Does your organization use a fund-raising counsel to plan, manage or advise you with respect to solicitations in Wisconsin? ☐ Yes ☐ No
If YES, provide the name and address of the fund-raiser or fund-raising counsel.
-
4. If your organization uses a fund-raising counsel, does the fund-raising counsel, at any time, have custody of any contributions? ☐ Yes ☐ No
-
5. List other states with which your organization is registered or from which it has a permit, license or any other formal authorization for soliciting contributions.
-
6. Has a license, permit, or registration of your organization ever been DENIED or REVOKED by another governmental agency or are proceedings pending? ☐ Yes ☐ No
If YES, attach a detailed statement of explanation.
-
7. Has your organization ever been enjoined from soliciting contributions or are proceedings pending? ☐ Yes ☐ No
If YES, attach a detailed statement of explanation.
-
8. Have any of your organization's officers or executive personnel ever been convicted of a felony or misdemeanor, or are charges pending? ☐ Yes ☐ No
If YES, list the persons, the nature of the conviction and the year of the conviction on the back of the next page.
-
9. Foreign corporations must provide a copy of the Certificate of Incorporation issued by the state in which they are incorporated.
-
10. Attach copy of your organization's Charter, Articles of Incorporation, Agreement of Association, Instrument of Trust, Constitution or other organizational instrument and bylaws.
-
11. Attach statement explaining how your organization will use contributions received.
-

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12. List all officers, directors, trustees and executive personnel. MARK IN THE FIRST COLUMN ALL INDIVIDUALS WHO ARE RESPONSIBLE FOR FINAL DISTRIBUTION OF CONTRIBUTIONS RECEIVED BY YOUR ORGANIZATION.

X	NAME	ADDRESS	TITLE

13. List the names of the persons within your organization who have final responsibility for the custody of contributions received by your organization.

NAME	ADDRESS	TITLE

CERTIFICATION: *We certify that the information furnished in this statement and all continuation sheets are true and correct to the best of our knowledge.*

TWO DIFFERENT SIGNATURES ARE REQUIRED BY LAW.

Date	Signature of President or Authorized Officer	Title
Date	Signature of Chief Fiscal Officer	Title

Subscribed and sworn before me this _____ day of _____, _____.

Signature of Notary Public

(Seal)

Date Commission Expires

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ADDENDUM TO APPLICATION – BUSINESS ENTITIES

Information requested is required for processing.

EMPLOYER IDENTIFICATION NUMBER. Your employer identification number or your social security number if you are a sole proprietorship must be submitted with your application on this form. If you do not have a social security number you must submit a statement under oath or affirmation. If your social security number or a statement is not provided, your application will be denied.¹ A form for submitting a statement that you do not have a social security number is available from the department.

(Please Print)

Business Entity Name

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FEIN

Type of Credential applying for

The Department may not disclose the employer identification number or social security number collected above except to the Department of Workforce Development for purposes of administering the child and spousal support program,² to the Department of Revenue for the purpose of determining whether you are liable for delinquent taxes,³ and to the federal Healthcare Integrity and Protection Data Bank for the purpose of reporting adverse actions against health care practitioners.⁴

DELINQUENT STATE TAXES; DELINQUENT SUPPORT

All applications for professional credentials are checked to determine whether the applicant is liable for delinquent state taxes. Under state law, the department must deny your application if you are liable for delinquent Wisconsin taxes.⁶ If you are liable for delinquent state taxes, pay the delinquent amount before the application process is completed. Retain proof that you have satisfied the tax delinquency. If you have any questions about payment of delinquent taxes, please contact your nearest Department of Revenue office or call (608) 261-6249. An application may be denied or a credential suspended if an applicant or credential holder is delinquent in paying support or fails to comply with a subpoena or warrant issued by the department of workforce development or a county child support agency related to support or paternity proceedings.²

#2552 (4/03)

¹ Section 440.03 (11m), Wis. Stats.

² Sections 49.22, and 440.13, Wis. Stats.

³ Section 440.12, Wis. Stats.

⁴ Health Insurance Portability and Accountability Act (HIPAA) of 1996

⁵ Section 440.14, Wis. Stats.

⁶ Section 440.12, Wis. Stats.

This form is authorized by secs. 440.12 and 440.14, Wis. Stats. Making a false statement in connection with this application may result in revocation or denial.

Committed to Equal Opportunity in Employment and Licensing

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CONVICTIONS AND PENDING CHARGES

If you have been convicted of a crime or have criminal charges pending against you, complete this form and return it with your application. Include a \$6.00 Crime Information Bureau report fee in addition to your original application fees.

The Fair Employment Act (sections 111.31-111.395, Wis. Stats.) prohibits employment discrimination on the basis of conviction record or arrest record unless the circumstances of the conviction or arrest substantially relate to the circumstances of the particular job or licensed activity. The information requested on this form will be used to determine whether your application should be granted, approved with limitations, or denied. The information you provide on this form may be verified against criminal information records. Omission of information on this form will be considered a false statement on an application.

Profession you are applying for: _____

Last Name	First Name	MI	Former / Maiden Name(s)
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Your Street Address (number, street, city, state, zip) _____

Mail To Address (if different) _____

Date of Birth	Social Security Number
____ month ____ day ____ year	____ - ____ - ____
Information helps us identify your record, but is voluntary. It is not available to the public.	

Ethnic/gender information is required to check criminal information records. Sex: ☐ M ☐ F Ethnic: ☐ White, not of Hispanic origin ☐ Black, not of Hispanic origin ☐ Hispanic ☐ American Indian or Alaskan ☐ Asian or Pacific Islander ☐ Other

- List all other names used: _____
- List all felonies, misdemeanors, and other violations of state or federal law of which you have ever been convicted, in this state or any other, whether the conviction resulted from a plea of no contest or a guilty plea or verdict. For each, list the date and location of the conviction. Please include all convictions that involved alcohol or other drug use, including convictions for operating while intoxicated. Do not include municipal ordinance violations or other traffic offenses.

It is your responsibility to submit certified copies of the police report or criminal complaint, judgment of conviction and sentencing, and verification of your compliance with all terms of each sentence, including chemical dependency assessments if ordered by the court. If the conviction is old and records have been destroyed, you must submit a written description of each offense, along with an explanation of the penalties imposed and verification that you completed all requirements.

<u>OFFENSE</u>	<u>DATE</u>	<u>CITY/STATE</u>

Attach additional sheet(s) if necessary.

State of Wisconsin Department of Regulation & Licensing

3. Have you ever been sentenced by a court to participate in an alcohol or other drug assessment, treatment or counseling program? YES NO MO/YR COMPLETED
☐ ☐ _____
Did you successfully complete the program? ☐ ☐ _____
Please attach the certificate of completion/discharge summary.

- (Check all that apply)
4. Have you ever been sentenced to: YES NO MO/YR COMPLETED
☐ Probation ☐ ☐ _____
☐ Parole ☐ ☐ _____
☐ Ordered to pay restitution ☐ ☐ _____
Did you successfully complete one of the above as ordered by the court? ☐ ☐ _____

If you are currently on probation or parole, you must request your probation/parole officer to send a letter describing your current probation/parole requirements and your compliance with supervision.

5. List all felonies, misdemeanors, or other violations of state or federal law for which you have been arrested and which are **pending**. Submit a copy of the police report/criminal complaint for each of the following pending charges.

<u>PENDING CHARGE</u>	<u>DATE OF ARREST</u>	<u>LOCATION OF ARREST (city/state)</u>
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Comments you wish to make regarding your convictions or pending charges. Attach another sheet if necessary.

AFFIDAVIT OF APPLICANT

I state that I am the person referred to in this document and that all the information which I provided above is true in every respect. I understand that false or forged statements made in this document in connection with my application for a credential, or failing to provide relevant information, may be grounds for denial of the application, revocation of the credential granted to me, or criminal prosecution. This document must be signed before a notary public.

Signature

State of _____ County of _____

Signed and sworn before me this _____ day of _____, 20 _____ by _____
(applicant's name)

Signature of Notary Public

My commission (is permanent) _____ expires _____.

SEAL

Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935
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FAX #: (608) 267-3816
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53703
E-Mail: web@drl.state.wi.us
Website: <http://www.drl.state.wi.us>

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

WORKSHEET CONCERNING EXEMPTION FROM REGISTRATION AS A CHARITABLE ORGANIZATION

NAME OF ORGANIZATION	CONTACT PERSON
ADDRESS OF ORGANIZATION (#, Street, City, State, Zip)	DAYTIME TELEPHONE NUMBER ()

- ☐ We have reviewed the 11 reasons listed below for a charitable organization being exempt from registering as a charitable organization with the Wisconsin Department of Regulation and Licensing and we have concluded that we must register. Please send an application form to us.
- ☐ We believe we are not required to register as a charitable organization with the Wisconsin Department of Regulation and Licensing because: (Please check the statement that best fits your reason for exemption; therefore, do not check the box in front of the above paragraph.)
- ☐ 1. We are not a charitable organization, as defined in sec. 440.41, Stats.
- ☐ 2. We are a charitable organization, BUT WE DO NOT SOLICIT CONTRIBUTIONS.
NOTE: A private foundation, IF IT DOES NOT SOLICIT contributions, also falls under this exemption. See sec. 440.41, Stats., for the definition of "solicit" and "solicitation".
- ☐ 3. We are a religious entity that is exempt from filing a federal annual information return (Form #990) under sec. 6033(1)(2)(A)(i) and (iii) and (C)(i) of the Internal Revenue Code.
NOTE: SUMMARY OF EXEMPTIONS FOR FILING RETURNS
Section 6033(a)(2)(A)(i): Churches, their integrated auxiliaries, and conventions or associations of churches.
Section 6033(a)(2)(A)(iii): The exclusively religious activities of any religious order.
Section 6033(a)(2)(C)(i): A religious organization described in sec. 501(c)(3) of the Internal Revenue Code
- ☐ 4. I am or we are a candidate for national, state or local office or a political party or other committee or group required to file financial information with the federal elections commission or a filing officer under sec. 11.02, Stats.
- ☐ 5. We are a charitable organization which does not intend to raise or receive contributions in excess of \$5,000 during a fiscal year and all of our functions, including solicitation, are performed by persons who are unpaid for their services and no part of our assets or income inures to the benefit of, or is paid to, any officer or member of the charitable organization.
NOTE: If a charitable organization would otherwise be exempt under sec. 440.42(5)(a)3, Stats., but it raises or receives more than \$5,000 in contributions or pays someone to do fund-raising functions, it must, within 30 days register with the department.

Wisconsin Department of Regulation & Licensing

- ☐ 6. We are a fraternal, civic, benevolent, patriotic or social organization that solicits contributions solely from our membership.

NOTE: An initial membership, when conferred solely as consideration for making a grant or pledge of money in response to a solicitation, is a contribution.

- ☐ 7. We are a veterans organization incorporated under Ch. 188, Stats., or chartered under federal law or the service foundation of a veterans organization recognized in the bylaws of the veterans organization.

- ☐ 8. We are an educational institution or its authorized charitable foundations which solicit contributions only from our students and their families, alumni, faculty, trustees, corporations, foundations and patients.

- ☐ 9. I am or we are a person soliciting contributions for the relief of a named individual and all contributions, without any deductions, were or will be given to the named individual.

- ☐ 10. We are a state agency, as defined in sec. 20.001(1), Stats., or a local government unit, as defined in sec. 605.01(1), Stats.

NOTE: Section 20.001(1), Stats., reads: “‘State agency’ means any office, department or independent agency in the executive branch of Wisconsin State government, the legislature and the courts.”

NOTE: Section 605.01(1), Stats., reads: “‘Local governmental unit’ means any local governmental association, authority, board, commission, department, independent agency, institution, office, society or other body, including any city, county, town or village board or common council, school or library board, or board of control of a cooperative educational service agency.”

- ☐ 11. We are a private school, as defined in sec. 118.165, Stats.

NOTE: Section 118.165, Stats., reads: “PRIVATE SCHOOLS. (1) An institution is a private school if its educational program meets all of the following criteria: (a) The primary purpose of the program is to provide private or religious-based education. (b) The program is privately controlled. (c) The program provides at least 875 hours of instruction each school year. (d) The program provides a sequentially progressive curriculum of fundamental instruction in reading, language arts, mathematics, social studies, science and health. This subsection does not require the program to include in its curriculum any concept, topic or practice in conflict with the program’s religious doctrines or to exclude from its curriculum any concept, topic or practice consistent with the program’s religious doctrines. (e) The program is not operated or instituted for the purpose of avoiding or circumventing the compulsory school attendance requirement under sec. 118.15(1)(a). (f) The pupils in the institution’s educational program, in the ordinary course of events, return annually to the homes of their parents or guardians for not less than 2 months of summer vacation, or the institution is licensed as a child welfare agency under sec. 48.60(1). (2) An institution may request the state superintendent to approve the institution’s educational program as a private school. The state superintendent shall base his or her approval solely on the criteria under sub. (1).”

I certify that the information provided above is true and correct to the best of our knowledge.

(Signature of Authorized Officer)

(Date)

(Title of Authorized Officer)

Wisconsin Department of Regulation & Licensing

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1400 E. Washington Avenue
Madison, WI 53703
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Website: <http://www.drl.state.wi.us>

NOTICES

TIME FOR REVIEW AND DETERMINATION OF CREDENTIAL APPLICATIONS

Generally, a credentialing authority is required to make a determination on an original application for a credential within 60 business days after a completed application is received.^a An application is completed when all materials necessary to make a determination on the application and all materials requested by the licensing authority have been received.

PROCEDURES ON APPLICATION DENIAL

An applicant who receives a notice of denial may request a hearing to challenge the denial by filing a request with the appropriate board or the department within 45 days after the mailing of the notice of denial. The request must contain the applicant's name and address, the type of license sought, the reasons why a hearing is requested and a description of the mistake the applicant believes was made, if the applicant claims that the denial was based on a mistake of fact or law. Hearing procedures are specified in ch. RL 1 of the Wisconsin Administrative Code. A copy of ch. RL 1 is available at most public libraries, on the Internet through the index at <http://www.legis.state.wi.us/rsb/code/rl/rl.html> and may also be obtained from the department.

MAILING ADDRESS AND CHANGE OF ADDRESS

Credential holders may use a business address as a mailing address for department mail. A change of address must be reported to the department within 30 days.

PERSONALLY IDENTIFIABLE INFORMATION: USE AND AVAILABILITY

Information collected on an application form is required and will be used to determine eligibility for a credential or examination. It is not likely that the department will use information collected by these forms for other purposes.

Credentialing is a public process with a goal of identifying those competent to protect the public. The name, city, and status of credential holders are accessible at the Department's website at <http://www.drl.state.wi.us/> under "Credential Holder Query." Information collected on application and examination forms is available for inspection to the public under Wisconsin laws governing public records.

AMERICANS WITH DISABILITIES ACT

The Department complies with the Americans With Disabilities Act of 1990. The Department will make reasonable modifications to policies, practices and procedures when modifications are necessary to avoid discrimination on the basis of disability and will make reasonable accommodations necessary to provide a qualified individual with a disability with equal access to department programs.

Communications and examinations: Individuals who need auxiliary aids for effective communication in programs and services or who wish to request special accommodations for examinations, please call (608) 266-2852 or TTY at (608) 267-2416.

Complaints: Procedures for alleging violations of the Americans with Disabilities Act of 1990 may be obtained by calling the Department's ADA Coordinator at (608) 266-8608 or TTY at (608) 267-2416.

#1988 (Rev. 2/03) ss. 15.04 (1) (m), 19.35, Stats.

^a Section RL 4.06 of the Wisconsin Administrative Code

